

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/ 5 78449

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1		1		
3		1				
4		1				
5		1				
6		1				
7		1				
8		1				
9		1				
10		1		1		
11		1				
12		1				
13		1				
14		1				
15		1				
16		1				
17		1				
18		1				
19		1				
20		1				
21		1		1		
22		1				
23		1				
24		1				
25		1				
26		1				
27		1				
28		1				
29		1				
30		1				
31		1		1		
32		1				
33		1				
34		1				
35		1				
36		1				
37		1				
38		1				
39		1				
40	1		1			
41		1		1		
42		1				
43		1				
44		1				
45		1				
46		1				
47	1		1			
48		1		1		
49		1				
50		1				
TOTAL IND.		↓		↓		↓
TOTAL DEP.	←		←		←	
TOTAL CLAIMS						

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51		1				
52		1				
53		1				
54	1					
55		1				
56		1		1		
57		1				
58		1				
59		1				
60		1				
61		1				
62		1				
63	1					
64		1				
65		1				
66		1				
67		1				
68		1				
69		1				
70	1					
71		1				
72		1				
73		1				
74		1				
75		1				
76		1				
77		1				
78		1		1		
79		1		1		
80		1		1		
81		1		2		
82		1		2		
83		1		2		
84		1		2		
85		1		2		
86		1		2		
87		1				
88	1			2		
89		1				
90		1				
91		1				
92		1				
93		1				
94		1				
95		1				
96	1		1			
97		1				
98	1			2		
99	1		1			
100		1				
TOTAL IND.		↓		↓		↓
TOTAL DEP.	←		←		←	
TOTAL CLAIMS						

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

101 578449

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
101		①		2		
2						
3						
4						
5						
6						
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8						
9						
10						
11						
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14						
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48						
49						
50						
TOTAL IND.	10	↓	10	↓		↓
TOTAL DEP.	91	←	40	←		←
TOTAL CLAIMS	101		50			

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
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89						
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						